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Bib Data Sheet

CONFIRMATION NO. 9271

<b>SERIAL NUMBER</b> 09/617,459	<b>FILING OR 371(c) DATE</b> 07/17/2000 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 070-C1
<b>APPLICANTS</b> Frederick G. St. Goar, Menlo Park, CA; John H. Stevens, Palo Alto, CA; Hanson S. Gifford, III, Woodside, CA; Bartley P. Griffith, Pittsburgh, PA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 08/839,189 04/23/1997 PAT 6,090,096				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/07/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 20
Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 27777				
<b>TITLE</b> Antegrade cardioplegia catheter and method				
<b>FILING FEE RECEIVED</b> 603	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	